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<b>REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	Application Number	10/596,069-Conf. #1467
	Filing Date	March 9, 2007
	First Named Inventor	John G. Errington
	Art Unit	1722
	Examiner Name	Not Yet Assigned
	Attorney Docket Number	27606-00001-US1

I hereby revoke all previous powers of attorney given in the above-identified application.

 A Power of Attorney is submitted herewith

OR

 I hereby appoint the practitioners associated with the Customer Number: 30678 Please change the correspondence address for the above-identified application to: The address associated with  
Customer Number:

30678

OR

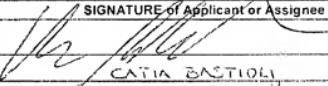
 Firm or  
Individual Name

Address			
City			
Country	State	Zip	
Telephone	Email		

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	CATIA BASTIOLI		
Date	01 December 2006 Telephone		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input type="checkbox"/>	*Total of <u>1</u> forms are submitted.		